



April 13, 2015
Announcement 909

Provider Web Portal: Search Fee Schedule Error Message Based on Provider Type

The Search Fee Schedule page of the Provider Web Portal will not allow the following provider types (PTs) to search for fees online, because additional information is required to determine their rates:

- Home Health Agency (PT 29)
- Ambulatory Surgical Centers (PT 46)
- Hospice (PT 64)
- ASC or ESRD codes for bundled rates

If a search is done using PT 29, 46 or 64, the following error message will be displayed: "Provider Type is Invalid." Examples showing the error message are below:

Home Health Agency (PT 29):

Error
Provider Type is invalid.

Search Fee Schedule

* Indicates a required field.

Select a code type, then enter the procedure code or description and provider type.

- This page is used only for Nevada Fee For Service (FFS) rates.
- The fee displayed to the user as a result of the search may not be the amount the provider receives; Information on the claim may affect actual fee amount. The information contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information contained herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.

Financial Payer and Benefit Nevada Medicaid Title XIX Fee For Service

*Code Type

*Procedure Code or Description

*Provider Type
Provider Type is invalid.

Modifier

Provider Specialty

Ambulatory Surgical Center (PT 46):

Error
Provider Type is invalid.

Search Fee Schedule

* Indicates a required field.

Select a code type, then enter the procedure code or description and provider type.

- This page is used only for Nevada Fee For Service (FFS) rates.
- The fee displayed to the user as a result of the search may not be the amount the provider receives; Information on the claim may affect actual fee amount. The information contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information contained herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.

Financial Payer and Benefit Nevada Medicaid Title XIX Fee For Service

*Code Type

*Procedure Code or Description

*Provider Type
Provider Type is invalid.

Modifier

Provider Specialty

Hospice (PT 64):

Error
Provider Type is invalid.

Search Fee Schedule ?

* Indicates a required field.
Select a code type, then enter the procedure code or description and provider type.

- This page is used only for Nevada Fee For Service (FFS) rates.
- The fee displayed to the user as a result of the search may not be the amount the provider receives; Information on the claim may affect actual fee amount. The information contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information contained herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.

Financial Payer and Benefit Nevada Medicaid Title XIX Fee For Service

*Code Type

*Procedure Code or Description

*Provider Type
Provider Type is invalid.

Modifier

Provider Specialty

If a search is done using ASC or ESRD codes that have bundled rates, the search will not return results. The following example shows the message that will appear at the bottom of the screen "There are no records found based on the search criteria entered":

Search Fee Schedule ?

* Indicates a required field.
Select a code type, then enter the procedure code or description and provider type.

- This page is used only for Nevada Fee For Service (FFS) rates.
- The fee displayed to the user as a result of the search may not be the amount the provider receives; Information on the claim may affect actual fee amount. The information contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information contained herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.

Financial Payer and Benefit Nevada Medicaid Title XIX Fee For Service

*Code Type

*Procedure Code or Description

*Provider Type

Modifier

Provider Specialty

There are no records found based on the search criteria entered.